



Memorandum

TO: All HIV/STD Regional and Local Managers

FROM: HIV/STD Comprehensive Services Branch

DATE: May 24, 2005

SUBJECT: Standards for Use of the Internet (Websites, Chat Rooms and Electronic Mail) to Initiate Partner Services

Introduction

The following standards are designed to assist trained Disease Intervention Specialists (DIS) at regional and local health departments in accessing individuals and their identified social networks through the use of Internet websites, associated chat rooms and e-mail. *DIS using these methods of communication must still maintain the high standards associated with more traditional contact procedures.* Maintaining confidentiality, providing accurate and culturally sensitive health education and risk reduction messages, providing referral information and performing case management activities must be part of any investigation using the Internet as a means to contact individuals exposed to disease.

The following standards cover issues relating to confidentiality, the use of chat-rooms (both public and private) to disseminate information, the use of e-mails to initiate partner services and ways to identify as a health department employee. Also included are templates for contacting individuals using e-mail as the referral mechanism. Local and regional health department STD Program staff should consult with their supervisors and Information Technology departments (IT) concerning these activities prior to implementing any of these recommendations.

Confidentiality

The standards established by the Texas Department of State Health Services (DSHS) for maintaining client confidentiality must be followed in all types of communications involving any individual who may have been exposed to an STD, including HIV, or with the social network identified through case management activities. As these standards emphasize, face-to-face partner notification is the preferred method, followed by telephone notification (for STDs other than HIV). Partner notification over the Internet should be used only as a final, alternative method. See *DSHS Program Operating Procedures and Standards* - <http://www.tdh.state.tx.us/hivstd/guidelines/default.htm>.

Notification Using Electronic Mail

Activities involving e-mail partner services must follow the established guidelines for telephone contacts. E-mail partner notification should be limited to information stressing the need for immediate communication with the DIS, either by e-mail, phone, or person-to-person, and include the DIS name, office location and phone number. No specific medical information relating to the possible exposure to an infection should be provided until the DIS has a reasonable assurance this individual is the person the DIS is trying to locate. As is normal practice in all interviews, as much identifying information from the original patient or partner (address, physical description, aliases) is used to assist in confirming the identity of the person being investigated. **DIS need to determine if an email account is shared, or if others have access.** If there is any concern about the identity of the individual or the confidentiality of the situation, the DIS should seek another, more traditional means for providing information to the individual.

Send all emails: a). Confidential; b). Of high importance; and c). With an automatic request for notification when the email is read. Never use a private email account to conduct health department or DIS business.

Notification using Chat Rooms and Screen Names

There will be occasions when a DIS has only an individual's screen name associated with a website chat room. Sometimes an email can be sent to the individual using the screen name linked with the web address of the chat room. (Example: sexybob@gay.com). If an email is not possible, the DIS needs to determine if the use of a private chat-room is an appropriate mechanism for providing partner services.

To enter a specific chat room, contact the site provider to set up a work-related profile and screen name. **Never use a personal profile or screen name to conduct DIS business.** Discussions in *public* chat rooms should be limited to health education, risk reduction messages and general STD referral information. If DIS can locate the individual on line, have him/her enter a private chat room. Discussions in *private* chat rooms DIS should begin with a confidentiality statement from the DIS, followed by a confirmation of understanding from the other party. Example:

The information I need to discuss with you is sensitive and of a highly personal nature. I will maintain strict confidentiality and I need you to do the same. Any dissemination, distribution or copying of this communication is strictly prohibited. Do not forward this email to others. If you are not comfortable discussing confidential matters via email, I will be glad to call you or you may call me at (555) 555-5555.

Avoid discussing specific medical information until comfortable you are communicating with the appropriate individual. Verify the individual's identity, and then ask him/her to call you, or arrange a face-to-face meeting to discuss the situation. If you cannot convince the contact to call or meet, the notification can proceed much like a telephone contact including: notification of possible exposure, information about the disease in question, an appointment or referral for exam and treatment, and problem solving discussion about barriers to completing the exam process. Complete locating and identifying information should be elicited and documented in the patient record. *Note: As with telephone contacts, email notification of exposure does not apply to HIV when an individual refuses to call or meet.*

Many websites restrict the number of contacts for public health notification. Please adhere to their guidelines.

Impact on Daily Business

DIS need to investigate Internet use in the original interview. If the original patient meets partners through the net, ask for the web address of the chat room(s), and for screen names and email addresses of all partners. When the real name of the partner is unknown, document the screen name or email address in the last name *and* in A.K.A sections of the field record in STD*MIS. Other information such as chat room address, specific room within an Internet site, plus days and times for contact should be documented in the note section of the field record.

Prior to any e-mail partner service activity, DIS should attempt to obtain the geographic location of the individual. E-mail addresses with an identified geographic location outside of the DIS jurisdiction will require an “out of jurisdiction” (OOJ) field record to be initiated. Knowing the geographic location of the patient allows the DIS to provide appropriate referral information (i.e. clinic locations, clinic times).

When a contact telephones or comes to the clinic, ask how he/she was notified. If the individual was notified via e-mail or Internet, the DIS may not have the real name. Ask the individual for his/her Internet screen name or e-mail address, then conduct the STD*MIS search. Once the DIS confirms the identity of the individual through other locating information obtained from the original patient, update the field record with the real name and place an updated version of the FR in the Expected-In box. Do not delete the screen name from A.K.A.

Print and attach to the field record (FR) all email and chat room correspondence with the date and time sent.

Confirming Identity

The individual being contacted for investigation may want to confirm the identity of the DIS (who he/she is and where he/she works) to ensure your email is real. Steps to facilitate this process could be as simple as using the DIS assigned regional or local e-mail address, including the health department logo within an email, or by providing a health department phone number and the name of the DIS supervisor or STD clinic manager that could be verified by the individual. Once the individual understands this is a legitimate and urgent matter, the individual may be more likely to respond to DIS attempts at contact.

Always use a cell phone or landline telephone with Caller I.D. capabilities. Record the telephone number the patient called from immediately following the call.

Follow-Up

Some individuals may consider seeking services at their private medical provider. When individuals respond with this plan, the DIS will obtain the provider information and alert the provider of the individual's exposure when possible. The individual should be advised to print the e-mail from the DIS, have the provider call the DIS to confirm the urgency of the matter and the recommended examination, testing and treatment protocols. The DIS must confirm the identity of the provider by taking a name and office number where the provider can be called back before providing any information over the phone.

Documentation

The first-line supervisor must maintain the log of all contact attempts via the internet. At a minimum, this log must contain the following information: Original Patient case number, the email or screen name of the partner, the real name of the partner if obtained, the disposition of the case, and the timeframe necessary for completion. See attached log.

Email Examples

The following referral notices highlight information included in any message left for an individual who may have been exposed to a disease. The dates utilized are suggested and may be adjusted to accommodate holidays and weekends. A more rapid timeframe is permissible.

If after sending an email, the partner or contact fails to respond:

- a). DIS should not send more than two emails without first talking with the supervisor, and b). Never send more than a total of three emails.

These notices must be used by DIS; any alteration to the format must be approved by local management and DSHS central office. Be sure to include a confidentiality statement to the bottom of all email correspondence.

Email - 1st attempt

Date: sent on Day 1 of the investigation

To: BOBsINLUV@worldnet.com

From: jinvestigator@tshd.state.tx.us

Subject: URGENT HEALTH MATTER

My name is John Investigator, and I am with the Texas State Health Department. I have urgent and confidential health information to discuss with you. I can be reached at my office at (555) 234-5678. Please contact me as soon as possible. Thank you, John Investigator.

Email - 2nd attempt

Date: sent on Day 3 of the investigation

To: BOBsINLUV@worldnet.com

From: jinvestigator@tshd.state.tx.us

Subject: HEALTH DEPARTMENT MATTER

My name is John Investigator and I work with the Texas State Health Department. I attempted to contact you on 01/01/04; I have some very important health information to share with you. This is a very urgent matter, and because of the confidential nature of this information, it is vital you contact me. Please call me at (555) 234-5678. I can be reached at this number from 8am to 5pm, Monday through Friday or you can contact me using my e-mail address jinvestigator@tshd.state.tx.us or my cell phone at (555) 255-5888. To assist you in confirming my identity, I have included my supervisor's name and phone number: Josefina Boss, Program Manager, (555) 234-5679. Please do not delay in contacting me.

John Investigator

Disease Intervention Specialist

Texas State Health Department

South Central District Office (555) 234-5678

If no response after Day 4, the DIS should discuss the situation with their supervisor. Attempt to re-interview the original patient for additional locating information, and consider having the OP complete the partner-locating guide (see attached). Also consider having the original patient attempt to notify the partner. The original patient can explain that a representative from the health department will be contacting him/her with important health-related information, plus provide the DIS name and office number.

Note: E-mail Partner Notification in the City of San Francisco Project Area was more successful (60%) when the original patient made contact first, with a follow-up by the DIS, as compared to the DIS making first contact (21%).

Email - 3rd attempt (option one)

Date: sent on Day 7 of the investigation

To: BOBsINLUV@worldnet.com

From: jinvestigator@tshd.state.tx.us

Subject: CRITICAL HEALTH MATTER

I am John Investigator with the Texas State Health Department. This is my third attempt to contact you through this e-mail address. On 01/01/04 and 01/03/04, I sent you an e-mail asking you contact me ASAP, because I have urgent health information to pass on to you. It is vital that you contact me immediately. As this is my only means of contacting you at this time, I hope you take this message seriously. I can be reached at my office Monday –Friday 7:30AM through 4:30PM or at my e-mail address jinvestigator@tshd.state.tx.us, or my cell phone at (555) 255-5888. To confirm my identity you can contact my supervisor at (555) 234-5679. Please do not delay!!!

John Investigator

Disease Intervention Specialist

Texas State Health Department

South Central Office

Email – 3rd attempt (option two)

Date: sent on Day 7 of the investigation

To: BobsINLUV@worldnet.com

From: jboss@tshd.state.tx.us

Subject: SUPERVISORY HEALTH MESSAGE

My name is Josefina Boss and I work with the Texas State Health Department. You have received a prior email from one of my employees, John Investigator. As John's supervisor, I am concerned that we have not heard from you. We have some urgent and confidential information we need to discuss with you, so please call John at (555) 234-5678, or myself at the number below.

Josefina Supervisor

Texas State Health Department

DIS Supervisor

(555) 234-5679

On Day 10 of the investigation and after three e-mail attempts with no response, the DIS should submit the field record to their supervisor as "unable to locate" or "H".

Chat Room Profile

Screen name: statehealth1

Name: John Investigator

Location: Anywhere, Texas

Occupation: I am a Disease Intervention Specialist with the Texas State Health Department.

Hobbies & Interests: I talk with people who have, or may have, a Sexually Transmitted Disease (STD), like Syphilis or HIV, about where to get tested and treated. I also talk with people about how to reduce the chances of getting an STD, or passing a disease on to others.

Pictures: For more information, visit our website www.texasstatehealth.org